Form 5558 (Rev. Feb. 1978) Department of the Treasury

244-410-1

Application for Extension of Time

to File Certain Employee Plan Returns

File With IRS Only

Int	ernal Revenue Se	rvice	to the Certain Employee than Neturns	·	_	· · · · · · · · · · · · · · · · · · ·			
CA	le in TRIPLI-	Name of ta	expayer, employer or plan administrator (see instructions)	Check applicable specific instructi	e box and enter r	number (see			
ď	ore the due ate for filing the return.	Address (N	umber and street)	Employer identification number					
	See general instructions 2 and 3.)	City or town	n, State, and ZIP code	Social secur	rity number	OR			
2	(a)	file Form 55 file Form 55 file Form 5 file Form 5 hecked (d) checked (d) year (com	intil (see specific instruction 1)	d schedules). d schedules). vith related schedulering Plans. of ERISA? nsor	dules).	es 🗍 No			
4	(a) Has an	extension of	of time to file the designated return(s) been previously granted for t	his taxable year	r? 🗆 Y	es No			
	(b) If "Yes,"	show the da	ate(s) to which the extension was granted (attach list if needed) \blacktriangleright .						
	(c) If you c return?(d) If 4(c)	hecked 1(a is "Yes," e), (b), (c) or (d), have you been granted an extension of time to file you been granted an extension of time to file you been granted an extension of time to file you be a supplication for extension of time to file you	your Federal inco	ome tax	es 🗌 No			
	• •		lied for" and enter your social security number, if applicable.						
5	Attach a de	ailed state	ment as to why you need the extension (see specific instruction 5).						
6			Form 5330, pay the amount of tax estimated to be due on Form 53	30 with this app	lication				
			n 6). Enter the amount of the tax here						
			payment of tax accrues at the rate established pursuant to section he return until paid. (For the amount of penalty due to late paym						
	mplete, that	I am autho	jury, I declare that to the best of my knowledge and belief the state orized to prepare this application, and that I am: orms 5500, 5500–C, 5500–K or 5330.	tements made h	erein are true, c	orrect, and			
믄			filing Forms 5500, 5500–C, 5500–K or 5330.						
Г			other than an employer, filing Form 5330.						
			orm 5330 to pay tax on excess contributions to a section 403(b)((7)(A) custodial	account or a K	eogh (H.R.			
_			anding of the bar of the highest court of (specify jurisdiction) $lacksquare$						
Н	A certified	public ac	countant duly qualified to practice in (specify jurisdiction)						
			practice before the Internal Revenue Service.						
	A duly aut	norized age	nt holding a power of attorney. The power of attorney need not be	submitted unle	ss requested.				
			Data N						
Sig	gnature >		Date ► Applicant.—THE INTERNAL REVENUE SERVICE WILL INDICATE SION IS GRANTED OR DENIED AND WILL RETURN THE ORIGINA						
						1			
	The applic However, date of th otherwise	ation IS None of view of very e return, we required to	oproved to OT approved. (Please attach this form to the return.) Your reasons stated in the application, a 10-day grace period is good constitutes a valid experiod on timely filed returns. OT approved.	ranted from the	date shown be	low or due			
		After consideration of the reasons stated in your application, we have determined the extension is not warranted. (The 10-day grace period is not granted.)							
		ation cann	ot be considered, since you filed it after the due date of the retu						
Ш									
		Date		Director					

If you want the original of this application returned to an address other than shown on page 1, please fill in such address below.

	Name
Please	
Print	Address (Number and street)
or	
Type	City or town, State, and ZIP code

General Instructions

1. Who May File.—Any of the persons listed on page 1, immediately above the signature, may use this application to request an extension of time to file the applicable return(s) listed under line 1, page 1. In general, a separate Form 5558 must be filed for each return for which an extension is requested.

Exception: One Form 5558 may be used to request an extension of time to file Forms 5500, 5500—C and 5500—K for all of a single employer's plans which have plan years ending on the same date. Attach a list, in the same format as line 3 on page 1, of all the plans for which additional time to file Forms 5500, 5500—C and 5500—K is requested.

- 2. When to File.—You must file the application in sufficient time for the Internal Revenue Service to consider and act on it before the return's regular due date.
- 3. How and Where to File.—Complete this form in triplicate and file it with the appropriate office shown in the list below.

If the principal place of business, office or agency (or legal residence, if you have no principal place of business or office or agency in the United States), is located in:

United States), is lo- cated in	Use this address
New Jersey, New York City and counties of Nassau, Rockland, Suffolk, and Westchester	Internal Revenue Service Center Holtsville, NY 00501
New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	Internal Revenue Service Center Andover, MA 05501
District of Columbia, Delaware, Maryland, Pennsylvania	Internal Revenue Service Center Philadelphia, PA 19255
Alabama, Florida, Georgia, Mississippi, South Carolina	Internal Revenue Service Center Atlanta, GA 31101
Michigan, Ohio	Internal Revenue Service Center Cincinnati, OH 45999
Arkansas, Kansas, Louisiana, New Mexico, Oklahoma, Texas	Internal Revenue Service Center Austin, TX 73301
Alaska, Arizona, Colorado, Idaho, Minnesota, Montana, Nebraska, Nevada, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming	Internal Revenue Service Center Ogden, UT 84201

Illinois, Iowa, Missouri, Internal Revenue Service

Center Kansas City, MO 64999

California, Hawaii	Internal Revenue Service Center Fresno, CA 93888		
Indiana, Kentucky,	Internal Revenue Service		
North Carolina,	Center		
Tennessee, Virginia,	Memphis, TN 37501		

If you have no legal residence, principal place of business or principal office or agency in any Internal Revenue district, file your return with the Internal Revenue Service Center, Philadelphia, PA 19255.

Specific Instructions

(Numbered to correspond to lines on the application)

Name and Address.—The employer's name and address must be entered in the heading of the application in all cases when it is filed for a single employer requesting an extension to file Form 5500, 5500–C or 5500–K.

Employer Identification Number or Social Security Number.—If this application is being filed for Form 5330 by an individual who made excess contributions to either a section 403(b)(7)(A) custodial account or a Keogh (H.R. 10) plan or who is a disqualified person other than an employer, then the individual's social security number should be entered in the appropriate blank. All others filing this application should enter their employer identification number.

1. Extension Period.—This application form may be used to request an extension for one return only unless the exception in General Instruction 1 applies.

An extension of time to file Forms 5500, 5500–C and 5500–K may be granted for a period not in excess of $2\frac{1}{2}$ months.

Note: Single employer plans and plans of a controlled group of corporations which file a consolidated income tax return where the plan year and the tax year coincide and the single employer or controlled group has been granted an extension to file its income tax return beyond the due date of the Forms 5500, 5500—C and 5500—K, such extension also applies to the Forms 5500, 5500—C and 5500—K. A copy of the approved IRS extension to file the income tax return must be attached to the Form 5500, 5500—C or 5500—K that is filed after the normal due date.

If circumstances warrant, an extension of time up to but not more than six

months may be granted for filing Form 5330. However, no extension will be granted if you are electing to be taxed under section 2003(c)(1)(B) of the Employee Retirement Income Security Act of 1974 (ERISA).

Reasons for Extension.—The Internal Revenue Service will grant a reasonable extension of time for filing a return if a timely application is filed that establishes the taxpayer's inability to file the return because of circumstances beyond his or her control. Generally, an application will be considered on the basis of the taxpayer's own efforts to fulfill this filing responsibility, rather than the convenience of anyone providing assistance in preparing the return. However, consideration will be given to any circumstances that prevent the taxpayer's practitioner, for reasons beyond his or her control, from filing the return by the due date, and to circumstances in which a taxpayer has been unable to get needed professional help in spite of timely efforts to do so.

You should clearly **describe** in your answer to line 5 the circumstances which will cause unavoidable delay in filing the return. Applications that give incomplete reasons, such as "illness" or "practitioner too busy," without adequate explanations, will not be approved. If it is clear that a request for extension is frivolous, solely to gain time, the Internal Revenue Service will deny both the extension request and the 10-day grace period.

6. Payment of Tax.—The total amount of tax estimated to be due must be paid in full on or before the normal due date of the return, which is the last day of the 7th month following the close of the taxable year. The amount of tax estimated to be due as shown on line 6 must be paid with this application.

An extension of time to file a Form 5330, unless it specifies otherwise, does not extend the time for payment of tax due. The law imposes a penalty for late payment of tax figured at one-half percent a month or fractional part of a month not to exceed 25 percent.

Interest accrues at a rate set pursuant to section 6621 of the Code on any tax due on the return from the regular due date until paid.